

TRANSMITTAL FORM

Application Number	10/698,970
Filing Date	October 31, 2003
First Named Inventor	R. Rox Anderson
Group Art Unit	3731
Examiner Name	Julian W. Woo
Attorney Docket No.	CDL-026C3
Patent No.	Not yet assigned
Issue Date	Not yet assigned

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Check Attached <input checked="" type="checkbox"/> Copy of Fee Transmittal Form <input checked="" type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____] <input checked="" type="checkbox"/> Petition for Extension of Time <input checked="" type="checkbox"/> Information Disclosure Statement <input checked="" type="checkbox"/> Form PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553) <input type="checkbox"/> Replacement Drawing(s) <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program <input type="checkbox"/> Amendment After Allowance	<input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction <input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below) <input checked="" type="checkbox"/> Exhibit A, Provisional Application No. 60/023,252
--	--	---

CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 12th day of April, 2007.

Erin K. Duff

CORRESPONDENCE ADDRESS

Direct all correspondence to: Patent Administrator
Proskauer Rose LLP
One International Place
Boston, MA 02110-2600
Tel. No.: (617) 526-9600
Fax No.: (617) 526-9899

SIGNATURE BLOCK

Date: April 12, 2007
Reg. No.: 56,471
Tel. No.: (617) 526-9717
Fax No.: (617) 526-9899

Respectfully submitted,

Scott K. Witonsky
Attorney for the Applicant(s)
Proskauer Rose LLP
One International Place
Boston, MA 02110-2600



PTO/SB/22 (08-03)

Approved for use through 7/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Attorney Docket No.: CDL-026C3	
Applicant:	Anderson et al.	Confirmation No.:	8805
Application No.:	10/698,970	Group No.:	3731
Filing Date.:	October 31, 2003	Examiner:	Julian W. Woo
Title:	METHOD AND APPARATUS FOR TREATING WRINKLES IN SKIN USING RADIATION		

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- ☐ One month (37 CFR 1.17(a)(1)) \$ _____
- ☒ Two months (37 CFR 1.17(a)(2)) \$ 450.00
- ☐ Three months (37 CFR 1.17(a)(3)) \$ _____
- ☐ Four months (37 CFR 1.17(a)(4)) \$ _____
- ☐ Five months (37 CFR 1.17(a)(5)) \$ _____

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one half, and the resulting fee is: \$0.00

☐ A check in the amount of the fee is enclosed.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 16-2500.

I am the

- ☐ applicant/inventor.
- ☐ assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).
- ☐ attorney or agent of record.
- ☒ attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) 56,471.

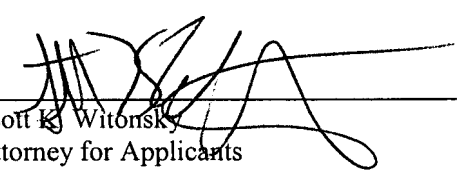
Respectfully submitted,

Date: April 12, 2007

Reg. No.: 56,471

Tel. No.: (617) 526-9717

Fax No. (617) 526-9899


Scott K. Witonsky
Attorney for Applicants
Proskauer Rose LLP
One International Place
Boston, MA 02110

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

04/25/2007 TNGUYEN2 00000074 503081 10698970

01 FC:1252 450.00 DA

7519/19684-046 Current/9506559v1



Complete if Known	
Application No.	10/698,970
Docket No.	CDL-026C3
Filing Date	October 31, 2003
First Named Inventor	R. Rox Anderson
Group No.	3731
Examiner Name	Julian W. Woo
Confirmation No.	8805

METHOD OF PAYMENT					FEE CALCULATION (continued)			
<input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other					4. ADDITIONAL FEES			
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 50-3081. <input checked="" type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input checked="" type="checkbox"/> Overpayment Credit.								
<input type="checkbox"/> Applicant claims small entity status. (deduct 50%)								
FEE CALCULATION								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
Application Type	Filing	Search	Examination	Fee Paid	Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
Utility	300	500	200		130	65	Surcharge - late filing fee or oath	
Design	200	100	130		50	25	Surcharge - late provisional filing fee or cover sheet	
Plant	200	300	160		130	130	Non-English specification	
Reissue	300	500	600		2,520	2,520	Request for ex parte re-examination	
Provisional	200	0	0		120	60	Extension for reply within 1 st mo.	
					450	225	Extension for reply within 2 nd mo.	\$450.00
					1,020	510	Extension for reply within 3 rd mo.	
					1,590	795	Extension for reply within 4 th mo.	
					2,160	1,080	Extension for reply within 5 th mo.	
					500	250	Notice of Appeal	
					500	250	Filing a brief in support of an appeal	
					1,000	500	Request for oral hearing	
					400	0	Petitions to the Director	
					180	180	Submission of IDS	\$180.00
					790	395	Filing a submission after final rejection (37 CFR 1.129(a))	
					790	395	For each additional invention to be examined (37 CFR 1.129(b))	
					100	100	Certificate of Correction for applicant's error	
					130	65	Submission of Terminal Disclaimer	
					Other fee (Specify)			
					Other fee (Specify)			
					4. TOTAL:			\$630.00
2. EXCESS CLAIM FEES								
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent.					50	25		
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent.					200	100		
Total Claims					Extra Claims		Fee Paid (\$)	
- 20 or HP= _____ x \$ _____ =								
HP = highest number of total claims paid for, if greater than 20								
Indep. Claims					Extra Claims		Fee Paid (\$)	
- 3 or HP= _____ x \$ _____ =								
HP = highest number of total claims paid for, if greater than 3								
Multiple Dependent Claims					Fee(\$)	Small Entity fee (\$)	Fee Paid (\$)	
					360	180		
2. TOTAL:								
3. APPLICATION SIZE FEE								
If the specification and drawing exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets	Extra Sheets	Additional 50 or fraction thereof	Fee (\$)	Fee Paid				
-100= 0	/50=	round up to a whole number	x	= 0.00				
3. TOTAL:								
CORRESPONDENCE ADDRESS								
Direct all correspondence to: Patent Administrator Proskauer Rose LLP One International Place Boston, MA 02110 Tel. No.: (617) 526-9600 Fax No.: (617) 526-9899								
					SIGNATURE BLOCK			
					Respectfully submitted, Scott B. Witonsky Attorney for the Applicant(s) Proskauer Rose LLP One International Place Boston, MA 02110-2600			
					Date: April 12, 2007 Reg. No.: 56,471 Tel. No.: (617) 526-9717 Fax No.: (617) 526-9899			